NOMINATION DETAILS																									
Dear Sir/Madam, Nomination Regi								gn. N	Vo.																
	Holder / Guardian (in case of minor) her								•			Date	e D			M	M		Y	Υ	Y	Y			
[Strike out what is not applicable] [Signatures of all account holders should be obtained on this								s forr	 n]																
are given below, in the event of the death of Sole holder or the death of all the Joint Holders.  BO ACCOUNT DETAILS																									
DP ID	1	2	0	7	-	6	4	T	o	0	Cli	ent ID	Т	Т			Т		Т		Т		Т		Т
Name of					┰		_				1 0								<u> </u>		<u>                                     </u>				
Name of	the	Secor	nd Ho	lder	T																				
Name of	the	Third	Holde	er																					
NOMINAT	ΓΙΟΝ	DETA	ILS	NOMINEE 1									N	IOMI	NEE 2	2			NOMINEE 3						
Nominee		me																							
First Nar																		-   -							
Middle N Last Nan		9																-   -							
Address'																		+-							
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Date of Bi																									
Name of of Nomir nominee First Nar	nee ( e is n	if the																							
Middle Name																	-   _								
Last Nan	ne*																	-   -							
Address of the Guardian of nominee*																									
City*																	$\dagger$								
State*																		$\top$							
PIN*																									
Country *																									

Age								
Telephone No.								
Fax No.								
E-mail Id								
Relationship of the Guardian with the Nominee								
Percentage of allocation of securities*								
Residual Securities [please tick any one nominee.* If tick not marked default will be first nominee]								
Note: Residual securities: incase of multiple nominees, please choose any one nominee who will be credited with								

**Note:** Residual securities: incase of multiple nominees, please choose any one nominee who will be credited with residual securities remaining after distribution of securities as per percentage of allocation. If you fail to choose one such nominee, then the first nominee will be marked as nominee entitled for residual shares, if any.

## \*Marked is Mandatory field

This nomination shall supersede any prior nomination made by me / us and also any testamentary document executed by me / us.

Note: One Witness shall attest signature(s) / Thumb Impression(s).

Details of the Witness								
Name of Witness								
Address of Witness								
Signature of Witness								

I/We confirm that I/We have received and read the copy of Rights & Obligations document and terms & conditions and agree to abide by and be bound by the same and by the Bye Laws as are in force from time to time. I / We declare that the particulars given by me/us above are true and to the best of my/our knowledge as on the date of making this application. I/We agree and undertake to intimate the DP any change(s) in the details / Particulars mentioned by me / us in this form. I/We further agree that any false / misleading information given by me / us or suppression of any material information will render my account liable for termination and suitable action.

	First / Sole Holder or Guardian (in case of Minor)	Second Holder	Third Holder
Name			
Signatures	(13)		<b>⇔</b>

(Signatures should be preferably in black ink)